

Paediatric Department

Bedwetting in children

Many children wet the bed and are still in nappies or pull-ups at night even after starting school. Becoming dry at night a bit later in childhood often runs in families but may not be spoken about openly. Most children and young people will grow out of bedwetting without any medical treatment, but there are lots of things parents can do to try and help.

Why do children wet the bed?

Children generally wet the bed because

- Their bladder isn't trained to 'stretch' enough to hold a big volume of wee overnight
- Their brain doesn't recognise the signals that their bladder is full and they need to wake up to wee
- They produce too much wee at night.

What can I do to help my child before seeking medical advice?

- Encourage your child to drink plenty of fluids, mainly water or sugar free squash, during the day. This helps to increase how well the bladder can stretch. The Drinking Guide opposite shows how much children should be drinking at different ages
- Make sure your child goes to the toilet regularly, around four to seven times a day, including just before bedtime

- "Double void" before bedtime – this means asking your child to wee at bedtime, then do something else, such as brush their teeth, and then try to have one last wee
- If your child has had enough to drink during the day, stopping drinks 1 hour before bedtime may help
- Make sure they have easy access to a toilet or potty at night, and a nightlight or torch so they can find it easily
- Talk to your child about the bedwetting and agree a plan together – having a positive approach will help both of you to find a solution
- If you think your child may be constipated, please have a look at our leaflet on constipation ([A0100-Constipation-in-children-2.pdf](#) (kingstonhospital.nhs.uk)) and if you are concerned, discuss this with your GP
- Try using a reward system, such as a sticker on a chart for every time they use the toilet before bed, or drink well during the day.

Drinking Guide

	Male	Female
Children 4-8 yrs	1200mls	1200mls
Children 9-13 yrs	1800mls	1600mls
14-18 year olds	2600mls	1800mls

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Contact your child's GP for advice if:

- Your child was dry for more than 6 months and then develops bedwetting again.

Bedwetting that starts after a long period of being dry may be due to a new medical condition, such as a urine infection or diabetes, or a stressful life event.

- You have tried the suggestions above and your child is still wetting the bed after the age of 7 years.

Children between 5 and 7 years of age may also be referred to a hospital paediatrician for treatment if your doctor thinks it is likely to be helpful. This is to rule out any underlying medical causes such as constipation. You can discuss treatment options too.

How can bedwetting be treated?

Bedwetting alarms –

These can be purchased online or you may be able to borrow one if you have been referred to a bedwetting clinic.

The alarm works by sensing moisture, which will cause the alarm to sound, ideally waking your child up so that they can get to the toilet before they completely empty their bladder. This is best used when both parent and child are very motivated to improve the bedwetting, as it takes hard work and often causes disturbed sleep! There are different manufacturers and the cost of alarms does vary greatly, so you might want to seek advice from <https://www.eric.org.uk/bedwetting-alarms> before investing in one.

Medicine

There is a medicine called 'desmopressin' that is sometimes prescribed to help. This is taken at bedtime and stops your child making as much urine overnight. This is not suitable for all children so do discuss with your doctor whether this would be appropriate. This medication can also be used in the short term to help with a special event e.g. overnight school trips or camps. Here is a helpful leaflet about desmopressin

<https://www.medicinesforchildren.org.uk/sites/default/files/content-type/leaflet/pdf/Desmopressin%20for%20bedwetting.pdf>

Medication and alarms can be used individually but can be more effective if used together.

Specialist clinics

Talking to a doctor or nurse who has a special interest in this area will help. They will try to work out with you and your child which of these measures is most likely to help in your child's situation. Your GP can refer your child to a Paediatrician or community bedwetting (enuresis) clinic, if they think further specialist help is needed.

Trusted sources of further information

Eric Free helpline: 0808 169 9949

<https://www.eric.org.uk/Pages/Category/bedwetting>.

<https://www.nhs.uk/conditions/bedwetting/>

<https://www.bbuk.org.uk/bladder-resources/>